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1. CORRESPONDENCE ADDRESS		2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)
		INVENTOR'S NAME
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		CO-INVENTOR'S NAME
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SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
1050-142-200	03/04/91	014	WILLIAMS, E.	
First Named Applicant			WILLIAMS, E.	

TITLE OF
INVENTION

APPARATUS FOR THE PREPARATION OF A HOMOGENOUS HEPATOPATENT

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
PTO-2000-07	866 000-000	137	111-111	111	\$1050.00	03/04/91

3. Further correspondence to be mailed to the following:

WEGNER, CANTOR, MUELLER & PLAYER
1233 20th Street, N.W., 3rd Flr.
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4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 Wegner, Cantor,
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2 _____
3 _____

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5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:

Centre International De Recherches Dermatologiques (SING)

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FRANCE

(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION

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THE COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Signature of party in interest of record)

(Date)

Harold A. Wegner, Reg. No. 25,258 2/26/91

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